

APPLICANT

NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/256,896	02/24/99	395	2763	30566.60US01

ALEXANDER THOEMMES, SAN RAFAEL, CA; BRETT K. BLOOMQUIST, SANTA ROSA, CA

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

RY

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

RY

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

RY

REQUIRED, FOREIGN FILING LICENSE GRANTED 03/16/99

Priority claimed 19 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 5
and Acknowledged Examiner's Initials <u>RY</u> Initials <u>RY</u>					

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ACQUIRING AND UNACQUIRING ALIGNMENT AND EXTENSION POINTS

FEE VED  222	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 1431

SERIAL NUMBER 09/256,896	FILING DATE 02/24/1999  RULE	CLASS 345	GROUP ART UNIT 2672	ATTORNEY DOCKET NO. 30566.60US01
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 03/16/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 5
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Verified and Acknowledged  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

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TITLE  
 ACQUIRING AND UNACQUIRING ALIGNMENT AND EXTENSION POINTS

FILING FEE  RECEIVED 1240	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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